

U.S. DEPARTMENT OF ENERGY

SECURITY TERMINATION STATEMENT

Full Name (Print - Last, First, Middle):		Social Security Number:
Employer Associated with Security Termination:		
Facility/Installation Where Security Terminated:		
Reason for Security Termination:		
Date of Security Termination:	DOE Clearance Number (if known):	
Present/Future Residence:	Name and Address of Future Employer (if known):	
Remarks:		

Purpose. This form is to be completed when an individual's DOE access authorization/security clearance is terminated or administratively withdrawn, in accordance with DOE O 472.2, "Personnel Security," and DOE O 470.4B, "Safeguards and Security," or successor directives. Termination will be recorded in personnel security files/databases. Document any variations in Remarks section, above.

I hereby make the following statement in connection with the forthcoming termination of my access authorization/security clearance granted by the U.S. Department of Energy (DOE):

1. In accordance with DOE security regulations, I have destroyed or transferred to persons designated by the DOE all classified and controlled unclassified documents and matter, either in my possession or for which I had responsibility.
2. I have returned to a DOE official or person acting for the DOE all security badges, credentials, or other identification or access media issued to me by the DOE or its contractors.
3. I will not reveal to any person any Restricted Data, Formerly Restricted Data, or other classified information or controlled unclassified information relating to national defense of which I have gained knowledge except as authorized by law, regulations of the DOE, or in writing by officials of the DOE empowered to grant permission for such disclosure.
4. I will immediately report to the Federal Bureau of Investigation (FBI) any attempt by an unauthorized individual to acquire from me classified information or controlled unclassified information relating to national defense.
5. I am aware that the Atomic Energy Act as amended of 1954 and/or U.S. Code, Title 18 "Crimes and Criminal Procedures," prescribe penalties for unauthorized disclosure, via any means, of Restricted Data, Formerly Restricted Data, other classified information, and controlled unclassified information relating to the national defense. I am further aware that I may be subject to criminal penalties if I have made any statement of material facts knowing that such statement is false or if I willfully conceal any material fact.

\_\_\_\_\_  
(Signature of Debriefing Official)

\_\_\_\_\_  
(Signature of Person Whose Access Authorization/  
Security Clearance is Being Terminated)

\_\_\_\_\_  
(Full Name and Title of Debriefing Official)

\_\_\_\_\_  
(Debriefing Date)

OFFICIAL USE  
ONLY

May be exempt from public release under the Freedom  
of Information Act (5 U.S.C. 552) Exemption (6) Personal  
Privacy. Department of Energy review required before public release.

Name/Org \_\_\_\_\_ Date \_\_\_\_\_  
Guidance \_\_\_\_\_

OFFICIAL USE ONLY  
(When filled in)

### **OMB BURDEN DISCLOSURE STATEMENT**

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Health, Safety and Security's Office of Departmental Personnel Security (HS-53), U.S. Department of Energy, 1000 Independence Avenue, S.W., Washington, D.C. 20585-1290 and to the Office of Management and Budget (OMB), Paperwork Reduction Project (1910-1800), Washington, D.C. 20503.

### **PRIVACY ACT STATEMENT**

Collection of the information requested is authorized by the Atomic Energy Act of 1954, as amended, and by Executive Orders 10450, 10865, and 13526. Disclosure of the information on this form is voluntary; however, your decision not to complete this form could result in a delay in processing any future request for reinstatement of your U.S. Department of Energy (DOE) access authorization/security clearance. Your DOE access authorization/security clearance can be terminated regardless of whether this form is completed. Your name and Social Security Number are used as identifying factors to establish and maintain records of DOE access authorization/security clearance actions in the DOE System of Records, DOE-43, "Personnel Security Files," and this completed form will be maintained in your DOE Personnel Security File.